



## TOWN OF HOPEDALE

78 Hopedale Street - P.O. Box 7  
Hopedale, Massachusetts 01747

Tel: 508-634-2203 Fax: 508-634-2200

## BOARD OF SELECTMEN

### LOCAL LICENSING AUTHORITY

### CLASS II LICENSE

(M.G.L. c 140, § 58)

*State Statute requires a Class 2 license for a person who is engaged principally and substantially in the business of buying, selling, or exchanging motor vehicles or trailers, maintains a facility dedicated to carrying out said business, and is open to the public.*

### NEW LICENSE - REQUIRED DOCUMENTATION:

1. Check made payable to the Town of Hopedale \$100
2. State Application for a License to Buy, Sell.....Second Hand Motor Vehicles \*Hobbs & Warren Form 53 IN DUPLICATE WITH ORIGINAL SIGNATURE
3. Town Application Form
4. Letter to Board of Selectmen explaining type of business and a **Plot Plan** showing building(s) sales & service, # garage bays, parking spaces for employees, parking spaces for customer, # of spaces for new vehicles, # of spaces for used vehicles, # of parking spaces for cars being repaired, emergency vehicle entrance(s) and egress(es) and customer entrances and egress
5. Surety Bond in the amount of \$25,000
6. Articles of Organization as filed with Massachusetts Secretary of States office
7. Certificate of Good Standing from Massachusetts Department of Revenue <https://mtc.dor.state.ma.us/mtc/> /
8. REAP Form (Revenue Enforcement Protection Attestation Form)
9. Worker's Compensation Insurance Affidavit
10. Worker's Compensation Policy Declaration Page
11. Emergency Contact Form
12. Business Certificate obtained from Town Clerk's Office (508) 634-2203 X 215
13. Abutter List obtained from Assessor's Office (508) 634-2203 X 224 listing all direct abutters to the establishment and land owner's directly opposite the establishment
14. **Public Hearing** (All Fees are paid by the Applicant)
15. Proof of mailing notice to abutters via certified mail (notice must be published in a local newspaper at least 7 days prior to the public hearing) and posted with the Town Clerk's Office
16. Approval from Town Departments, Board and Committees
17. Incomplete applications will not be accepted by the Selectmen's Office

### RENEWAL LICENSE - REQUIRED DOCUMENTATION:

1. Renewal Application Form
2. Surety Bond in the amount of \$25,000
3. Check made payable to the Town of Hopedale \$100
4. Articles of Organization as filed with Massachusetts Secretary of State's Office
5. Certificate of Good Standing from Massachusetts Department of Revenue <https://mtc.dor.state.ma.us/mtc/> /
6. REAP Form (Revenue Enforcement Protection Attestation Form)
7. Worker's Compensation Insurance Affidavit
8. Worker's Compensation Policy Declaration Page
9. Emergency Contact Form
10. Business Certificate obtained from Town Clerk's Office
11. Incomplete applications will not be accepted by the Selectmen's Office



RECEIVED BY BOARD OF  
SELECTMEN'S OFFICE

## TOWN OF HOPEDALE

DATE:

TIME

\*\*\*\*\*ONLY COMPLETE APPLICATIONS WILL BE ACCEPTED\*\*\*\*\*

### CLASS II LICENSE APPLICATION / RENEWAL (M.G.L. c.140, § 58)

#### TO THE HOPEDALE LOCAL LICENSING AUTHORITY AND / OR STATE LICENSING BOARD:

The undersigned hereby applies for an Class II Dealer's License per(M.G.L. c. 140, § 58) and in accordance with the provisions of the Statutes relating thereto, the bylaws of the town and provisions set by the Local Licensing Authority

#### PER TOWN OF HOPEDALE BYLAW

##### § 270-3. Denial, revocation or suspension of license or permit.

The licensing authority may deny, revoke or suspend any license or permit, including renewals and transfers of any party whose name appears on said list furnished to the licensing authority from the Tax Collector or with respect to any activity, event or other matter which is the subject of such license or permit and which activity, event or matter is carried out or exercised or is to be carried out or exercised on or about real estate owned by any party whose name appears on said list furnished to the licensing authority from the Tax Collector; provided, however, that written notice is given to the party and the Tax Collector, as required by applicable provisions of law, and the party is given a hearing, to be held not earlier than 14 days after said notice.

#### NEW APPLICANT REQUIRED DOCUMENTATION

Town Fee - \$100

Worker's Compensation Insurance Affidavit

Worker's Compensation Declaration Page

Town Application

Emergency Contact Form

Plot Plan with above listed items

Articles of Organization-Sec. of State

Certificate of Good Standing-MA DOR

Name and Address of Repair Facility

(2) Signed State Applications for a License  
to Buy Sell Second Hand Motor Vehicles

\*Hobbs & Warren Form 53

Business Certificate

\$25,000 Surety Bond

Public Hearing Notice

Sign off by Bldg, BOH, Police, Fire

REAP Form

#### RENEWAL APPLICANT REQUIRED DOCUMENTATION

Renewal Fee - \$100

Town Application

\$25,000 Surety Bond

Worker's Compensation  
Declaration Page

Certificate of Good Standing-MA DOR

REAP Form

Worker's Compensation Ins. Affidavit

Articles of Organization-Sec. of State

Emergency Contact Form

**ALL APPLICANT'S PLEASE PRINT:**

Date of Application: \_\_\_\_\_

DBA Name: \_\_\_\_\_

Business Address: \_\_\_\_\_  
Street Number Street Name City/Town State Zip

Bus. Owner Name: \_\_\_\_\_ Bus. Telephone: \_\_\_\_\_

Business Owner Home Address: \_\_\_\_\_  
Street Number Street Name City/Town State Zip

Corporation Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Corporation Address: \_\_\_\_\_  
Street Number Street Name City/Town State Zip

List the name and Address of the Garage where repair work will be done during the warranty: \_\_\_\_\_

**LIST HOURS OF OPERATION**

Weekdays: Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Saturdays: Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Sundays: Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Are you aware of the provisions of MGL Chapter 140 §§ 57-59? Will your principal business be the sale of motor vehicles? YES NO

Do you have a location ready for such a business? YES NO

Do you have experience in the business of the sale of motor vehicles? YES NO

Have you ever had a license to sell motor vehicles in this state or any other state denied? YES NO

Please explain: \_\_\_\_\_

What is your present principal business? \_\_\_\_\_

Please explain: \_\_\_\_\_

I hereby swear (affirm) under the pains and penalties of perjury that I am the person named above and that the information provided by me in this document is true and that I am aware of and shall comply with the MGL and Town Bylaw statutes.

Will or Are vehicles repaired on site? \_\_\_\_\_

If so, Please explain; \_\_\_\_\_

If not, Name and Address of Repair Facility: \_\_\_\_\_

I hereby swear (affirm) under the pains and penalties of perjury that I am the person named above and that the information provided by me in this document is true and that I am aware of and shall comply with the MGL and Town Bylaw statutes.

\_\_\_\_\_  
Applicant's Printed Name

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Land Owner's Signature (New Applicants Only)

\_\_\_\_\_  
Date

**NEW APPLICATIONS ONLY**

PLEASE OBTAIN RECOMMENDATIONS FROM INSPECTOR'S PRIOR TO SUBMITTING APPLICATION TO THE BOARD OF SELECTMEN OFFICE

Bldg. Inspector: \_\_\_\_\_ Date: \_\_\_\_\_ Recommend Do Not Recommend

BOH Agent: \_\_\_\_\_ Date: \_\_\_\_\_ Recommend Do Not Recommend

Fire Chief: \_\_\_\_\_ Date: \_\_\_\_\_ Recommend Do Not Recommend

Police Chief: \_\_\_\_\_ Date: \_\_\_\_\_ Recommend Do Not Recommend

Comments: \_\_\_\_\_

Board of Selectmen REVIEW DATE: \_\_\_\_\_

Board of Selectmen APPROVAL DATE: \_\_\_\_\_

Conditions of Approval: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



TOWN OF HOPEDALE  
78 Hopedale Street  
Hopedale, MA 01747

## Commonwealth of Massachusetts

**Section 49A. (a)** A person applying to any department, board, commission, division, authority, district or other agency of the commonwealth or a subdivision of the commonwealth, including a city, town or district, for a right or license to conduct a profession, trade or business or for the renewal of the right or license, shall certify upon application, under penalties of perjury, that he has complied with all laws of the commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

### REVENUE ENFORCEMENT & PROTECTION ATTESTATION (REAP)

#### MASSACHUSETTS DEPARTMENT OF REVENUE

Pursuant to M.G.L. c. 62C § 49A, I certify under the penalties of perjury that to the best of my knowledge and belief I, and/or the entity applying for licensure, have complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

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Social Security Number if sole proprietor; **OR** Federal Identification Number, if a corporation  
Corporations must use the Federal Tax Id number  
(one or the other is required)

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Corporate Name: \_\_\_\_\_ Business and/or DBA Name: \_\_\_\_\_

**Must List Corporate Name as it appears Federal Tax Forms  
also List DBA Name**

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Authorized Signature: \_\_\_\_\_ Must Print Name & Title  
**Signature and Printed Name & Title (If Corporation must be current corporate officer)**

Name of Person on License Application (Print) : \_\_\_\_\_

Residential Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_ Date Completed: \_\_\_\_\_

This information will be furnished to the Massachusetts Department of Revenue to determine whether you have filed all state tax returns, paid all state taxes required under law and complied with all laws of the Commonwealth relating to taxes. Licensees who fail to correct their non-filing, delinquency status, or who are not in compliance with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support will be subject to license suspension or revocation under M.G.L. c. 62C § 49A.

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**The Commonwealth of Massachusetts**  
**Department of Industrial Accidents**  
**1 Congress Street, Suite 100**  
**Boston, MA 02114-2017**

[www.mass.gov/dia](http://www.mass.gov/dia)

**Workers' Compensation Insurance Affidavit: General Businesses.**  
**TO BE FILED WITH THE PERMITTING AUTHORITY.**

**Applicant Information**

**Please Print Legibly**

Business/Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Are you an employer? Check the appropriate box:**

1. ☐ I am an employer with \_\_\_\_\_ employees (full and/or part-time).\*
2. ☐ I am a sole proprietor or partnership and have no employees working for me in any capacity.  
[No workers' comp. insurance required]
3. ☐ We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]\*\*
4. ☐ We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

**Business Type (required):**

5. ☐ Retail
6. ☐ Restaurant/Bar/Eating Establishment
7. ☐ Office and/or Sales (incl. real estate, auto, etc.)
8. ☐ Non-profit
9. ☐ Entertainment
10. ☐ Manufacturing
11. ☐ Health Care
12. ☐ Other \_\_\_\_\_

\*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

\*\*If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

***I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.***

Insurance Company Name: \_\_\_\_\_

Insurer's Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Policy # or Self-ins. Lic. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).**

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

***I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

**Official use only. Do not write in this area, to be completed by city or town official.**

City or Town: Town of Hopedale Permit/License # \_\_\_\_\_

**Issuing Authority (circle one):**

1. Board of Health 2. Building Department 3. City/Town Clerk **4. Licensing Board** 5. Selectmen's Office  
6. Other \_\_\_\_\_

Contact Person: Susan Brouwer Phone #: 508-634-2203 X 210



THE COMMONWEALTH OF MASSACHUSETTS  
**TOWN OF HOPEDALE**  
**EMERGENCY CONTACT FORM**

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**Name of Licensed Business**

\_\_\_\_\_  
**Address of Business**

**EMERGENCY CONTACT INFORMATION**

\_\_\_\_\_  
**Name of Emergency Contact**

\_\_\_\_\_  
**24 Hour Emergency Contact Telephone Number**

**Licenses applying *for or held* in the Town of Hopedale:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Business Hours**

**Weekday Business Hours of Operation Mon-Fri:** \_\_\_\_\_

**Weekend Business Hours of Operation Sat. & Sun:** \_\_\_\_\_

**ONLY COMPLETE IF YOU ARE APPLYING FOR AN ENTERTAINMENT LICENSE**

**Weekday Entertainment Hours Mon-Fri:** \_\_\_\_\_

**Weekend Entertainment Hours Sat. & Sun:** \_\_\_\_\_

**Types of Entertainment:** \_\_\_\_\_

\_\_\_\_\_

The premises is \_\_\_\_\_ **ALARMED** \_\_\_\_\_ **NOT ALARMED**

The premises has \_\_\_\_\_ **SPRINKLER SYSTEM** \_\_\_\_\_ **DOES NOT HAVE SPRINKLER SYSTEM**

***THIS FORM MUST BE COMPLETED BEFORE A LICENSE IS ISSUED***



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**ARTICLE I, Delinquent Taxpayers <sup>EN</sup> [Adopted 6-26-1990 STM, Art. 13 (Ch. XXI of the Town Bylaws); amended 4-9-2002 STM, Art. 3]**

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**§ 270-1. Authority to deny license or permit.**

The Town of Hopedale may deny any application for, or revoke or suspend a building permit, or any local license or permit including renewals and transfers issued by any board, officer, department for any person, corporation or business enterprise, who has neglected or refused to pay any local taxes, fees, assessments, betterments or any other municipal charges, including amounts assessed under the provisions of MGL c. 40, § 21D, or with respect to any activity, event or other matter which is the subject of such license or permit and which activity, event or matter is carried out or exercised or is to be carried out or exercised on or about real estate whose owner has neglected or refused to pay any local taxes, fees, assessments, betterments or any other municipal charges.

**§ 270-2. List of delinquent taxpayers.**

The Tax Collector shall annually furnish to each department, board, commission or division, hereinafter referred to as the "licensing authority," that issues licenses or permits including renewals and transfers, a list of any person, corporation, or business enterprise, hereinafter referred to as the "party," that has neglected or refused to pay any local taxes, fees, assessments, betterments or other municipal charges for not less than a twelve-month period, and that such party has not filed in good faith a pending application for an abatement of such tax or a pending petition before the Appellate Tax Board.

**§ 270-3. Denial, revocation or suspension of license or permit.**

The licensing authority may deny, revoke or suspend any license or permit, including renewals and transfers of any party whose name appears on said list furnished to the licensing authority from the Tax Collector or with respect to any activity, event or other matter which is the subject of such license or permit and which activity, event or matter is carried out or exercised or is to be carried out or exercised on or about real estate owned by any party whose name appears on said list furnished to the licensing authority from the Tax Collector; provided, however, that written notice is given to the party and the Tax Collector, as required by applicable provisions of law, and the party is given a hearing, to be held not earlier than 14 days after said notice.

A. Said list shall be prima facie evidence for denial, revocation or suspension of said license or permit to any party.

B. The Tax Collector shall have the right to intervene in any hearing conducted with respect to such license denial, revocation or suspension.

C. Any findings made by the licensing authority with respect to such license denial, revocation or suspension shall be made only for the purposes of such proceeding and shall not be relevant to or introduced in any other proceeding at law, except for any appeal from such license denial, revocation or suspension.